

18-353

FILED**FEB 06 2018****CLERK U.S. BANKRUPTCY,
ORLANDO DIVISION**

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
	First Name	Middle Name
Debtor 2	AISHA AIN SCANTLEBURY	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number 618BK00353CCJ (If known)		

 Check if this is an amended filing**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)	\$ 644,797.00
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$ 644,797.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 113,500.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 758,297.00

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 843,000.00
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D	\$ 843,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 34,161.23
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$ 34,161.23
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$ 40,450.53
	Your total liabilities \$ 917,611.76

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	\$ 11,950.00
Copy your combined monthly income from line 12 of Schedule I.....	\$ 11,950.00
5. Schedule J: Your Expenses (Official Form 106J)	\$ 10,585.38
Copy your monthly expenses from line 22c of Schedule J.....	\$ 10,585.38

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 7,926.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**Total claim****From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 40,450.53
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 40,450.53

Fill in this information to identify your case and this filing:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	AISHA AIN SCANTLEBURY	
First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number <u>618BK00353CCJ</u>		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 3320 PINE OAK TRAIL

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 131,955.00 \$ 131,955.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

If you own or have more than one, list here:

1.2. 334 LAKE CRESCENT DR

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 234,842.00 \$ 234,842.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

1.3. 407 E FREESIA CT Street address, if available, or other description		What is the property? Check all that apply.	
		<input checked="" type="checkbox"/> Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
		<input type="checkbox"/> Duplex or multi-unit building	
		<input type="checkbox"/> Condominium or cooperative	
		<input type="checkbox"/> Manufactured or mobile home	
		<input type="checkbox"/> Land	
		<input type="checkbox"/> Investment property	
		<input type="checkbox"/> Timeshare	
		<input type="checkbox"/> Other _____	
DELAND FL 32724 City State ZIP Code		Current value of the entire property? Current value of the portion you own? \$ 278,000.00 \$ 278,000.00	
VOLUSIA County		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
		<input type="checkbox"/> Check if this is community property (see instructions)	
		Other information you wish to add about this item, such as local property identification number: _____	
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.		\$ 644,797.00	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
 Yes

3.1. Make: HONDA
Model: ODYSSEY
Year: 2016
Approximate mileage: 50000

Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 29,000.00 \$ 29,000.00

Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: BUICK
Model: ENCLAVE
Year: 2008
Approximate mileage: 194000

Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 7,000.00 \$ 7,000.00

Check if this is community property (see instructions)

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name

Middle Name

Last Name

Case number (if known) 618BK00353CCJ

3.3. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information: _____
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

3.4. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information: _____
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

4.1. Make: _____

Model: _____

Year: _____

Other information: _____
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

If you own or have more than one, list here:

4.2. Make: _____

Model: _____

Year: _____

Other information: _____
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here →

\$ 36,000.00

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name

Last Name

Case number (if known) 618BK00353CCJ

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.....

APPLIANCES, FURNITURE

\$ 5,000.00

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.....

ELECTRONICS

\$ 1,000.00

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....

\$

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....

\$

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....

\$

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....

\$

13. Non-farm animals*Examples:* Dogs, cats, birds, horses No Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information.....

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

→

\$ 6,000.00

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name

Last Name

Case number (if known) 618BK00353CCJ

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No
 Yes

Cash: \$ _____

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- No
 Yes

Institution name:

17.1. Checking account:	SEACOAST BANK	\$ 5,000.00
17.2. Checking account:	_____	\$ _____
17.3. Savings account:	_____	\$ _____
17.4. Savings account:	SEACOAST BANK	\$ 500.00
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	_____	\$ _____
17.7. Other financial account:	_____	\$ _____
17.8. Other financial account:	_____	\$ _____
17.9. Other financial account:	_____	\$ _____

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- No
 Yes

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- No
 Yes. Give specific information about them.

Name of entity:	% of ownership:	
THE PEOPLES INCOME TAX CORP	100% %	\$ 60,000.00
S&H TRANSPORT GROUP INC	100% %	\$ 0.00
_____	0% %	\$ _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them.....

Issuer name: _____ \$ _____
 _____ \$ _____
 _____ \$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each

account separately. Type of account: Institution name:

401(k) or similar plan:	GREATWEST TRUST COMPANY	\$ 6,000.00
Pension plan:	_____	\$ _____
IRA:	_____	\$ _____
Retirement account:	_____	\$ _____
Keogh:	_____	\$ _____
Additional account:	_____	\$ _____
Additional account:	_____	\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes

Institution name or individual:

Electric:	_____	\$ _____
Gas:	_____	\$ _____
Heating oil:	_____	\$ _____
Security deposit on rental unit:	_____	\$ _____
Prepaid rent:	_____	\$ _____
Telephone:	_____	\$ _____
Water:	_____	\$ _____
Rented furniture:	_____	\$ _____
Other:	_____	\$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes Issuer name and description:

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them....

_____	\$ _____
-------	----------

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them....

_____	\$ _____
-------	----------

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them....

_____	\$ _____
-------	----------

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.

_____	Federal: \$ _____
	State: \$ _____
	Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....

_____	Alimony: \$ _____
	Maintenance: \$ _____
	Support: \$ _____
	Divorce settlement: \$ _____
	Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.....

_____	\$ _____
-------	----------

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value....

Company name:

NEW YORK LIFE

Beneficiary:

CLEMENT SCANTLEBL

Surrender or refund value:

\$ 0.00

\$ _____

\$ _____

\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.....

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.

\$ _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim.

\$ _____

35. Any financial assets you did not already list No Yes. Give specific information.....

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 71,500.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.....

\$ _____

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.....

\$ _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

 No Yes. Describe.....

	\$
--	----

41. Inventory

 No Yes. Describe.....

	\$
--	----

42. Interests in partnerships or joint ventures

 No Yes. Describe..... Name of entity:

% of ownership:

	%	\$
	%	\$
	%	\$

43. Customer lists, mailing lists, or other compilations

 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

	\$
--	----

44. Any business-related property you did not already list

 No Yes. Give specific information

	\$
	\$
	\$
	\$
	\$
	\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

	\$
--	----

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
First Name Middle Name Last NameCase number (*if known*) 618BK00353CCJ

48. Crops—either growing or harvested

 No Yes. Give specific information.....

	\$ _____
--	----------

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes.....

	\$ _____
--	----------

50. Farm and fishing supplies, chemicals, and feed

 No Yes.....

	\$ _____
--	----------

51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.....

	\$ _____
--	----------

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$ _____

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

	\$ _____
	\$ _____
	\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$ _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → \$ 644,797.00

56. Part 2: Total vehicles, line 5 \$ 36,000.00

57. Part 3: Total personal and household items, line 15 \$ 6,000.00

58. Part 4: Total financial assets, line 36 \$ 71,500.00

59. Part 5: Total business-related property, line 45 \$ _____

60. Part 6: Total farm- and fishing-related property, line 52 \$ _____

61. Part 7: Total other property not listed, line 54 + \$ _____

62. Total personal property. Add lines 56 through 61. \$ 113,500.00

Copy personal property total → + \$ 113,500.00

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$ 758,297.00

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
	First Name	Middle Name
Debtor 2	AISHA AIN SCANTLEBURY	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number (if known)	618BK00353CCJ	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
Brief description: <u>PRIMARY RESIDENCE</u>	\$278,000.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : 1.3			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from <i>Schedule A/B</i> : _____			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name

Last Name

Case number (if known) 618BK00353CCJ

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: <u>FAMILY VEHICLE</u>	\$ <u>29,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: <u>3.1</u>			
Brief description: <u>WORK VEHICLE</u>	\$ <u>7,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: <u>3.2</u>			
Brief description: <u>APPLIANCES AND F</u>	\$ <u>6,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: <u>6</u>			
Brief description: <u>ELECTRONICS</u>	\$ <u>1,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: <u>7</u>			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B:			

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	AISHA AIN SCANTLEBURY		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida			
Case number (if known) 618BK00353CCJ			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
\$ 361,000.00	\$ 131,955.00	\$

2.1 SPECIALIZED LOAN SERVICING INC.

Describe the property that secures the claim:

Creditor's Name
8742 LUCENT BOULEVARD
Number Street
SUITE 300
HIGHLANDS RANCH CO 80129
City State ZIP Code

3320 PINE OAK TRAIL SANFORD FL
32773

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 04/12/2006

Last 4 digits of account number 0 2 1 4

\$ 278,000.00 \$ 280,000.00 \$

2.2 NBKC BANK

Describe the property that secures the claim:

\$ 278,000.00 \$ 280,000.00 \$

Creditor's Name
10700 Nall Ave
Number Street

407 E FREESIA CT DELAND FL 32724

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 07/27/2017

Last 4 digits of account number 9 6 3 7

\$ 639,000.00

Add the dollar value of your entries in Column A on this page. Write that number here:

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Additional Page			Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				
2.3	loanDepot.com, LLC	Describe the property that secures the claim: \$ 204,000.00			\$ 299,000.00
Creditor's Name 26642 Towne Centre Drive Number Street		334 LAKE CRESCENT DR DEBARY FL 32713			
As of the date you file, the claim is: Check all that apply.					
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one.					
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim relates to a community debt					
Nature of lien. Check all that apply.					
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____					
Date debt was incurred 04/25/2011		Last 4 digits of account number 8 5 2 5			
Describe the property that secures the claim: \$ _____ \$ _____ \$ _____					
Creditor's Name					
Number Street					
As of the date you file, the claim is: Check all that apply.					
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim relates to a community debt					
Nature of lien. Check all that apply.					
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____					
Date debt was incurred _____		Last 4 digits of account number _____			
Describe the property that secures the claim: \$ _____ \$ _____ \$ _____					
Creditor's Name					
Number Street					
As of the date you file, the claim is: Check all that apply.					
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim relates to a community debt					
Nature of lien. Check all that apply.					
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____					
Date debt was incurred _____		Last 4 digits of account number _____			
Add the dollar value of your entries in Column A on this page. Write that number here: \$ 204,000.00					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ 843,000.00					

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 2:**List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number _____	
Number Street _____			
City State ZIP Code _____			
<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number _____	
Number Street _____			
City State ZIP Code _____			
<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number _____	
Number Street _____			
City State ZIP Code _____			
<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number 0 2 1 4	
Number Street _____			
City State ZIP Code _____			
<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number _____	
Number Street _____			
City State ZIP Code _____			
<input type="checkbox"/>	On which line in Part 1 did you enter the creditor? _____		
Name _____		Last 4 digits of account number _____	
Number Street _____			
City State ZIP Code _____			

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
First Name	Middle Name	Last Name
Debtor 2	AISHA AIN SCANTLEBURY	
(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number 618BK00353CCJ		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 AMERICAN EXPRESS Priority Creditor's Name P.O. BOX 650448 Number Street	Last 4 digits of account number <u>1 0 0 5</u>	\$ <u>1,477.04</u>	\$ _____
When was the debt incurred? <u>01/18/2017</u>			
As of the date you file, the claim is: Check all that apply.			
<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of PRIORITY unsecured claim:			
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>			
Is the claim subject to offset?			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
2.2 AMERICAN EXPRESS Priority Creditor's Name P.O. BOX 650448 Number Street	Last 4 digits of account number <u>2 0 0 8</u>	\$ <u>6,483.46</u>	\$ _____
When was the debt incurred? <u>01/05/2017</u>			
As of the date you file, the claim is: Check all that apply.			
<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of PRIORITY unsecured claim:			
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>			
Is the claim subject to offset?			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR

First Name

Middle Name

Last Name

Case number (if known) 618BK00353CCJ

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

	Total claim	Priority amount	Nonpriority amount
--	-------------	-----------------	--------------------

2.3	AMERICAN EXPRESS Priority Creditor's Name P.O. BOX 650448 Number Street DALLAS TX 75265 City State ZIP Code			Last 4 digits of account number <u>3 0 0 2</u>	Total claim <u>\$19,584.89</u>	Priority amount <u>\$</u>	Nonpriority amount <u>\$</u>
When was the debt incurred? <u>01/05/2017</u>							
As of the date you file, the claim is: Check all that apply.							
<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed							
Type of PRIORITY unsecured claim:							
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>							
Who incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes							
2.4	ELAN FINANCIAL SERVICES Priority Creditor's Name PO BOX 790408 Number Street ST LOUIS MO 63179 City State ZIP Code			Last 4 digits of account number <u>7 8 0 6</u>	Total claim <u>\$ 6,615.84</u>	Priority amount <u>\$</u>	Nonpriority amount <u>\$</u>
When was the debt incurred? <u>01/05/2017</u>							
As of the date you file, the claim is: Check all that apply.							
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed							
Type of PRIORITY unsecured claim:							
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>							
Who incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes							
2.4	CREDIT ONE BANK Priority Creditor's Name PO BOX 60500 Number Street CITY OF INDUSTRY CA 91715 City State ZIP Code			Last 4 digits of account number <u>4 8 6 7</u>	Total claim <u>\$ 2,258.11</u>	Priority amount <u>\$</u>	Nonpriority amount <u>\$</u>
When was the debt incurred? <u>01/05/2017</u>							
As of the date you file, the claim is: Check all that apply.							
<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed							
Type of PRIORITY unsecured claim:							
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>							
Who Incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes							

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Total claim
4.1 U.S. DEPARTMENT OF EDUCATION	Last 4 digits of account number <u>0 0 0 3</u> \$ <u>33,650.53</u>
Nonpriority Creditor's Name PO Box 7860 Number Street Madison WI 53707 City State ZIP Code	When was the debt incurred? <u>04/25/2003</u>
As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Who incurred the debt? Check one.	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
<input type="checkbox"/> Check if this claim is for a community debt	
Is the claim subject to offset?	
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
4.2 U.S. DEPARTMENT OF EDUCATION	Last 4 digits of account number <u>0 0 0 8</u> \$ <u>6,800.00</u>
Nonpriority Creditor's Name PO Box 7860 Number Street Madison WI 53707 City State ZIP Code	When was the debt incurred? <u>05/06/2008</u>
As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Who incurred the debt? Check one.	
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
<input type="checkbox"/> Check if this claim is for a community debt	
Is the claim subject to offset?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	
4.3	Last 4 digits of account number _____ \$ _____
Nonpriority Creditor's Name Number Street City State ZIP Code	When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Who incurred the debt? Check one.	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
<input type="checkbox"/> Check if this claim is for a community debt	
Is the claim subject to offset?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim _____

Nonpriority Creditor's Name _____

Last 4 digits of account number _____

\$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Nonpriority Creditor's Name _____

Last 4 digits of account number _____

\$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Nonpriority Creditor's Name _____

Last 4 digits of account number _____

\$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Name _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street _____

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

City _____ State _____ ZIP Code _____

Last 4 digits of account number _____

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ _____
	6b. Taxes and certain other debts you owe the government	6b. \$ _____
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ <u>34,161.23</u>
6e. Total. Add lines 6a through 6d.	6e. \$ <u>34,161.23</u>	
		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ <u>40,450.53</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ _____
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ _____
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ _____
	6j. Total. Add lines 6f through 6i.	6j. \$ <u>40,450.53</u>

Fill in this information to identify your case:

Debtor	CLEMENT IVELAW SCANTLEBURY JR		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	AISHA AIN SCANTLEBURY		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida			
Case number (if known) 618BK00353CCJ			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Name 334 LAKE CRESCENT DR Number Street DEBARY FL 32713 City State ZIP Code	RESIDENTIAL LEASE AGREEMENT FOR INVESTMENT PROPERTY AT 334 LAKE CRESCENT DR DEBARY FL 32713
2.2	Name 3320 PINE OAK TRAIL Number Street SANFORD FL 32773 City State ZIP Code	RESIDENTIAL LEASE AGREEMENT FOR INVESTMENT PROPERTY AT 3320 PINE OAK TRAIL SANFORD FL 32773
2.3	Name Number Street City State ZIP Code	
2.4	Name Number Street City State ZIP Code	
2.5	Name Number Street City State ZIP Code	

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

Additional Page If You Have More Contracts or Leases

Person or company with whom you have the contract or lease	What the contract or lease is for
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	
2. Name _____	
Number Street _____	
City _____ State _____ ZIP Code _____	

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR		
	First Name	Middle Name	Last Name
Debtor 2	AISHA AIN SCANTLEBURY		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida			
<input checked="" type="checkbox"/> Case number 618BK00353CCJ (if known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No
 Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent _____

Number Street _____

City State ZIP Code _____

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.1

Name _____

Number Street _____

City State ZIP Code _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.2

Name _____

Number Street _____

City State ZIP Code _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.3

Name _____

Number Street _____

City State ZIP Code _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name

Last Name

Case number (if known) 618BK00353CCJ

Additional Page to List More Codebtors**Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

3. _____

Name _____

Check all schedules that apply:

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

3. _____

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number Street _____

City _____ State _____ ZIP Code _____

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	AISHA AIN SCANTLEBURY	
First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number (if known)	618BK00353CCJ	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

- Employed
 Not employed

- Employed
 Not employed

Occupation

SELF EMPLOYED

SELF EMPLOYED

Employer's name

SELF EMPLOYED

SELF EMPLOYED

Employer's address

5422 N 441

5422 N 441

Number Street

Number Street

SUITE 400

SUITE 400

ORLANDO FL 32810

ORLANDO FL 32810

City State ZIP Code

City State ZIP Code

How long employed there? 1 YEAR

1 YEAR

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 6,000.00	\$ 2,000.00
3. Estimate and list monthly overtime pay.	3. + \$ _____	+ \$ _____
4. Calculate gross income. Add line 2 + line 3.	4. \$ 6,000.00	\$ 2,000.00

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→ 4.	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____
5e. Insurance	5e. \$ _____	\$ _____
5f. Domestic support obligations	5f. \$ _____	\$ _____
5g. Union dues	5g. \$ _____	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>6,000.00</u> \$ <u>3,000.00</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm <small>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</small>	8a. \$ <u>1,650.00</u>	\$ <u>1,300.00</u>
8b. Interest and dividends	8b. \$ _____	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive <small>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</small>	8c. \$ _____	\$ _____
8d. Unemployment compensation	8d. \$ _____	\$ _____
8e. Social Security	8e. \$ _____	\$ _____
8f. Other government assistance that you regularly receive <small>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____</small>	8f. \$ _____	\$ _____
8g. Pension or retirement income	8g. \$ _____	\$ _____
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$ <u>1,650.00</u> \$ <u>1,300.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>7,650.00</u> + \$ <u>4,300.00</u> = \$ <u>11,950.00</u>
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$ _____	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies		12. \$ <u>11,950.00</u>
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR		
	First Name	Middle Name	
Debtor 2	AISHA AIN SCANTLEBURY		
(Spouse, if filing)	First Name	Middle Name	
United States Bankruptcy Court for the: Middle District of Florida			<input type="checkbox"/>
Case number	618BK00353CCJ		(If known)

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:
 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

DAUGHTER

13

No

Yes

SON

10

No

Yes

DAUGHTER

8

No

Yes

SON

7

No

Yes

SON

5

No

Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

SON 4 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,784.00

If not included in line 4:

4a. \$ _____

4a. Real estate taxes

4b. \$ _____

4b. Property, homeowner's, or renter's insurance

4c. \$ _____

4c. Home maintenance, repair, and upkeep expenses

4d. \$ 161.38

4d. Homeowner's association or condominium dues

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (*if known*) 618BK00353CCJ

		Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5. \$ _____
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. \$ _____ 250.00
6b.	Water, sewer, garbage collection	6b. \$ _____ 80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ _____ 50.00
6d.	Other. Specify: _____	6d. \$ _____
7.	Food and housekeeping supplies	7. \$ _____
8.	Childcare and children's education costs	8. \$ _____ 350.00
9.	Clothing, laundry, and dry cleaning	9. \$ _____ 100.00
10.	Personal care products and services	10. \$ _____ 80.00
11.	Medical and dental expenses	11. \$ _____
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ _____ 350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ _____ 100.00
14.	Charitable contributions and religious donations	14. \$ _____ 500.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. \$ _____ 590.00
15b.	Health insurance	15b. \$ _____
15c.	Vehicle insurance	15c. \$ _____ 216.00
15d.	Other insurance. Specify: _____	15d. \$ _____
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ _____
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. \$ _____ 800.00
17b.	Car payments for Vehicle 2	17b. \$ _____
17c.	Other. Specify: _____	17c. \$ _____
17d.	Other. Specify: _____	17d. \$ _____
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ _____
19.	Other payments you make to support others who do not live with you. Specify: _____	19. \$ _____
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. \$ _____ 4,924.00
20b.	Real estate taxes	20b. \$ _____
20c.	Property, homeowner's, or renter's insurance	20c. \$ _____
20d.	Maintenance, repair, and upkeep expenses	20d. \$ _____
20e.	Homeowner's association or condominium dues	20e. \$ _____ 250.00

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 10,585.38

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 10,585.38

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from Schedule I.23a. \$ 11,950.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 10,585.38

23c. Subtract your monthly expenses from your monthly income.

23c. \$ 1,364.62The result is your *monthly net income*.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.

Explain here:

Fill in this information to identify your case:			
Debtor 1	First Name _____	Middle Name _____	Last Name _____
Debtor 2 (Spouse, if filing)	First Name _____	Middle Name _____	Last Name _____
United States Bankruptcy Court for the: Middle District of Florida			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/16

If two married people are filling together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.



Signature of Debtor 1



Signature of Debtor 2

Date 2/5/2018
MM / DD / YYYY

Date 2/5/2018
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	AISHA AIN SCANTLEBURY		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Florida			
Case number (If known)	618BK00353CCJ		

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1 Debtor 2:
lived thereDates Debtor 2
lived there Same as Debtor 1 Same as Debtor 1

3320 PINE OAK TRAIL

Number Street

From 06/12/2016

Number Street

From _____

To 01/08/2017

To _____

SANFORD FL 32773

City State ZIP Code

City State ZIP Code

 Same as Debtor 1 Same as Debtor 1

334 LAKE CRESCENT DR

Number Street

From 05/01/2011

Number Street

From _____

To 06/12/2016

To _____

DEBARY FL 32713

City State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (*if known*) **618BK00353CCJ****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

Debtor 1		Debtor 2		
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 16,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For last calendar year: (January 1 to December 31, 2017) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 100,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For the calendar year before that: (January 1 to December 31, 2016) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 96,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____

5. Did you receive any other income during this year or the two previous calendar years?Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

 No Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)	Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
For last calendar year: (January 1 to December 31, 2017) YYYY	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
For the calendar year before that: (January 1 to December 31, 2016) YYYY	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (*if known*) 618BK00353CCJ

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____	\$ _____	\$ _____	
Number Street _____ _____			
City _____ State _____ ZIP Code _____			
Insider's Name _____	\$ _____	\$ _____	
Number Street _____ _____			
City _____ State _____ ZIP Code _____			

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name _____	\$ _____	\$ _____	
Number Street _____ _____			
City _____ State _____ ZIP Code _____			
Insider's Name _____	\$ _____	\$ _____	
Number Street _____ _____			
City _____ State _____ ZIP Code _____			

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ****Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title _____ _____ Case number _____ _____	Court Name Number Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title _____ _____ Case number _____ _____	Court Name Number Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name Number Street City State ZIP Code	Explain what happened	\$ _____
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Describe the property		Date
Creditor's Name Number Street City State ZIP Code		Value of the property
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		\$ _____

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No
 Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			\$ _____
Number Street			
City	State ZIP Code	Last 4 digits of account number: XXXX-_____	

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$ _____
Number Street			\$ _____
City State ZIP Code			
Person's relationship to you			

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$ _____
Number Street			\$ _____
City State ZIP Code			
Person's relationship to you			

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ****14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?** No Yes. Fill in the details for each gift or contribution.

**Gifts or contributions to charities
that total more than \$600**

Describe what you contributed**Date you
contributed****Value**

Charity's Name _____

Number Street _____

City State ZIP Code _____

\$ _____

\$ _____

\$ _____

Part 6: List Certain Losses**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

**Describe the property you lost and
how the loss occurred**

Describe any insurance coverage for the loss**Date of your
loss****Value of property
lost**

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

\$ _____

\$ _____

Part 7: List Certain Payments or Transfers**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.**Description and value of any property transferred****Date payment or
transfer was
made****Amount of payment**

Person Who Was Paid _____

\$ _____

Number Street _____

\$ _____

City State ZIP Code _____

\$ _____

Email or website address _____

Person Who Made the Payment, if Not You _____

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City State ZIP Code				
Email or website address				
Person Who Made the Payment, if Not You				

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City State ZIP Code				\$ _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		_____
Number Street		_____
City State ZIP Code		
Person's relationship to you		
Person Who Received Transfer		_____
Number Street		_____
City State ZIP Code		
Person's relationship to you		

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- No
 Yes. Fill in the details.

Description and value of the property transferred**Date transfer was made**

Name of trust _____

--	--

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---------------------------------	-------------------------------	--	---

Name of Financial Institution

XXXX- _____

 Checking

\$ _____

Number Street

 Savings Money market Brokerage Other _____

City State ZIP Code

Name of Financial Institution

XXXX- _____

 Checking

\$ _____

Number Street

 Savings Money market Brokerage Other _____

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- No
 Yes. Fill in the details.

Who else had access to it?**Describe the contents****Do you still have it?**

Name of Financial Institution

Name _____

 No

Number Street

Number Street _____

 Yes

City State ZIP Code

City State ZIP Code _____

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name _____

No
 Yes

Number Street

Number Street _____

City State ZIP Code

CityState ZIP Code _____

City _____ State _____ ZIP Code _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name _____

\$ _____

Number Street _____

Number Street _____

City State ZIP Code

City State ZIP Code _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site _____

Governmental unit _____

Number Street _____

Number Street _____

City State ZIP Code

City State ZIP Code _____

Debtor 1 CLEMENT IVELAW SCANTLEBURY JR
 First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

25. Have you notified any governmental unit of any release of hazardous material?

- No
 Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
	City State ZIP Code	
City	State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
 Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title	Court Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number Street	
Case number	City State ZIP Code	

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

THE PEOPLES INCOME TAX C

Business Name

5422 N 441

Number Street

SUITE 400

ORLANDO FL 32810

City State ZIP Code

Describe the nature of the business

INCOME TAX PREPERATION

Employer identification number

Do not include Social Security number or ITIN.

EIN: 4 5 3 9 4 7 3 7 8

Dates business existed

From 12/01/2011 To 09/26/2014

S&H TRANSPORT GROUP INC

Business Name

5422 N 441

Number Street

SUITE 400

ORLANDO FL 32810

City State ZIP Code

Describe the nature of the business

FREIGHT TRANSPORTATION

Employer identification number

Do not include Social Security number or ITIN.

EIN: 4 7 -- 4 6 7 7 1 6

Dates business existed

From 07/30/2015 To 09/22/2017

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ**

		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name			
Number Street		Name of accountant or bookkeeper	
City	State	ZIP Code	From _____ To <u>09/22/2017</u>

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
 Yes. Fill in the details below.

Date issued

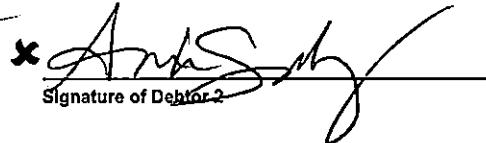
Name _____ MM / DD / YYYY
 Number Street

 City _____ State _____ ZIP Code _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.


 Signature of Debtor 1


 Signature of Debtor 2

Date 02/05/2018Date 02/05/2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No
 Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	CLEMENT IVELAW SCANTLEBURY JR	
First Name	Middle Name	Last Name
Debtor 2	AISHA AIN SCANTLEBURY	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: Middle District of Florida		
Case number 618BK00353CCJ (If known)		

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
3. The commitment period is 3 years.
4. The commitment period is 5 years.

 Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$ 0.00
3. Alimony and maintenance payments. Do not include payments from a spouse.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Debtor 1 Debtor 2 Ordinary and necessary operating expenses \$0.00 \$0.00	\$0.00 -\$0.00	\$0.00 -\$0.00
Net monthly income from a business, profession, or farm Copy here → \$ 6,000.00 \$ 2,000.00	\$0.00 -\$0.00	\$0.00 -\$0.00
6. Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 Debtor 2 Ordinary and necessary operating expenses \$50.00 \$0.00	\$50.00 -\$74.00	\$0.00 -\$50.00
Net monthly income from rental or other real property Copy here → \$ -24.00 \$ -50.00	\$24.00 -\$50.00	\$0.00 -\$50.00

Debtor 1

CLEMENT IVELAW SCANTLEBURY JR

First Name Middle Name Last Name

Case number (if known) 618BK00353CCJ

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00	
8. Unemployment compensation	\$ 0.00	\$ 0.00	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓			
For you.....	\$ _____		
For your spouse	\$ _____		
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$ 0.00	
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.	\$ 0.00	\$ 0.00	
	\$ 0.00	\$ 0.00	
Total amounts from separate pages, if any.	+ \$ 0.00	+ \$ 0.00	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 5,976.00	+ \$ 1,950.00	= \$ 7,926.00
			Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income12. Copy your total average monthly income from line 11. \$ 7,926.00

13. Calculate the marital adjustment. Check one:

- You are not married. Fill in 0 below.
 You are married and your spouse is filing with you. Fill in 0 below.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\$ 0.00	
\$ 0.00	
+ \$ 0.00	
Total.....	\$ 0.00
	Copy here ➔
	— 0.00

14. Your current monthly income. Subtract the total in line 13 from line 12. \$ 7,926.00

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here ➔ \$ 7,926.00Multiply line 15a by 12 (the number of months in a year). x 1215b. The result is your current monthly income for the year for this part of the form. \$ 95,112.00

Debtor 1 **CLEMENT IVELAW SCANTLEBURY JR**
 First Name Middle Name Last Name

Case number (if known) **618BK00353CCJ****16. Calculate the median family income that applies to you. Follow these steps:**16a. Fill in the state in which you live. **FL**16b. Fill in the number of people in your household. **8**16c. Fill in the median family income for your state and size of household. **\$ 106,558.00**
 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.**17. How do the lines compare?**17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3.* Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income* (Official Form 122C-2).
 On line 39 of that form, copy your current monthly income from line 14 above.**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**18. Copy your total average monthly income from line 11. **\$ 7,926.00**

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. **— \$ 0.00**19b. Subtract line 19a from line 18. **\$ 7,926.00****20. Calculate your current monthly income for the year. Follow these steps:**20a. Copy line 19b. **\$ 7,926.00**Multiply by 12 (the number of months in a year). **x 12**20b. The result is your current monthly income for the year for this part of the form. **\$ 95,112.00**20c. Copy the median family income for your state and size of household from line 16c. **\$ 106,558.00****21. How do the lines compare?**21a. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.21b. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.



Signature of Debtor 1



Signature of Debtor 2

Date 2/5/2018
MM / DD / YYYYDate 02/05/2018
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.